

Agency Report of: Public Official Appointments

A Public Document

1. Agency Name City of Torrance		California Form 806 For Official Use Only
Division, Department, or Region (If Applicable)		
Designated Agency Contact (Name, Title) Rebecca Poirier, City Clerk		
Area Code/Phone Number 310-618-2870	E-mail CityClerk@TorranceCA.Gov	Date Posted: 07/18/2018 (Month, Day, Year)
Page 1 of 1		

2. Appointments

Agency Boards and Commissions	Name of Appointed Person	Appt Date and Length of Term	Per Meeting/Annual Salary/Stipend
Sanitation District of Los Angeles	Name <u>Furey, Patrick J.</u> (Last, First) Alternate, if any <u>Rizzo, Geoff</u> (Last, First)	Appt Date <u>07 / 17 / 18</u> Length of Term _____	Per Meeting: \$ <u>187.50</u> Estimated Annual: <input checked="" type="checkbox"/> \$0-\$1,000 <input type="checkbox"/> \$2,001-\$3,000 <input type="checkbox"/> \$1,001-\$2,000 <input type="checkbox"/> Other
Southern California Association of Governments	Name <u>Furey, Patrick J.</u> (Last, First) Alternate, if any <u>Griffiths, Mike</u> (Last, First)	Appt Date <u>07 / 17 / 18</u> Length of Term _____	Per Meeting: \$ <u>120.00</u> Estimated Annual: <input checked="" type="checkbox"/> \$0-\$1,000 <input type="checkbox"/> \$2,001-\$3,000 <input type="checkbox"/> \$1,001-\$2,000 <input type="checkbox"/> Other
West Vector Control District of Los Angeles County	Name <u>Griffiths, Mike</u> (Last, First) Alternate, if any _____ (Last, First)	Appt Date <u>07 / 17 / 18</u> Length of Term <u>12/31/19</u>	Per Meeting: \$ <u>100.00</u> Estimated Annual: <input checked="" type="checkbox"/> \$0-\$1,000 <input type="checkbox"/> \$2,001-\$3,000 <input type="checkbox"/> \$1,001-\$2,000 <input type="checkbox"/> Other
	Name _____ (Last, First) Alternate, if any _____ (Last, First)	Appt Date <u> / / </u> Length of Term _____	Per Meeting: \$ _____ Estimated Annual: <input type="checkbox"/> \$0-\$1,000 <input type="checkbox"/> \$2,001-\$3,000 <input type="checkbox"/> \$1,001-\$2,000 <input type="checkbox"/> Other

3. Verification

I have read and understand FPPC Regulation 18702.5 I have verified that the appointment and information identified above is true to the best of my information and belief.

	Rebecca Poirier	City Clerk	07/18/18
Signature of Agency Head or Designee	Print Name	Title	(Month, Day, Year)

Comment: _____

FPPC Form 806 (1/18)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)